

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective Date December 8, 2004

Application or Docket Number

10/540970

## CLAIMS AS FILED - PART I

|                                                           | (Column 1)                                                            | (Column 2)                             |
|-----------------------------------------------------------|-----------------------------------------------------------------------|----------------------------------------|
| U.S. NATIONAL STAGE FEES                                  |                                                                       |                                        |
| BASIC FEE                                                 | SMALL ENT. = \$ 150                                                   | LARGE ENT. = \$ 300                    |
| EXAMINATION FEE                                           | Satisfies PCT Article 33(1)-(4) = \$ 50 / \$ 100                      | All other situations = \$ 100 / \$ 200 |
| SEARCH FEE                                                | U.S. is ISA = \$ 50 / \$ 100<br>ALL other countries = \$ 200 / \$ 400 | All other situations = \$ 250 / \$ 500 |
| FEE FOR EXTRA SPEC. PGS.                                  | minus 100 =                                                           | / 50 =                                 |
| TOTAL CHARGEABLE CLAIMS                                   | 8 minus 20 =                                                          |                                        |
| INDEPENDENT CLAIMS                                        | 1 minus 3 =                                                           |                                        |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |                                                                       |                                        |

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☒

OR OTHER THAN SMALL ENTITY

| RATE       | FEE |
|------------|-----|
| BASIC FEE  | 150 |
| EXAM. FEE  | 100 |
| SEARCH FEE | 200 |
| X \$ 125 = |     |
| X \$ 25 =  |     |
| X \$ 100 = |     |
| + \$ 180 = |     |
| TOTAL      | 450 |

OR

OR

OR

OR

OR

OR

## CLAIMS AS AMENDED - PART II

|                                                                         | (Column 1) | (Column 2)                       | (Column 3)                         |
|-------------------------------------------------------------------------|------------|----------------------------------|------------------------------------|
| AMENDMENT A                                                             | 6/29/05    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total                                                                   | 8          | Minus                            | ** 20                              |
| Independent                                                             | 1          | Minus                            | *** 3                              |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |            |                                  |                                    |

SMALL ENTITY TYPE ☒

OR

OTHER THAN SMALL ENTITY

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 25 =        |                |
| X \$ 100 =       |                |
| + \$ 180 =       |                |
| TOTAL ADDIT. FEE |                |

OR

OR

OR

OR

OR

OR

(Column 1)

(Column 2)

(Column 3)

|                                                                         | (Column 1) | (Column 2)                       | (Column 3)                         |
|-------------------------------------------------------------------------|------------|----------------------------------|------------------------------------|
| AMENDMENT B                                                             |            | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total                                                                   |            | Minus                            | **                                 |
| Independent                                                             |            | Minus                            | ***                                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |            |                                  |                                    |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 25 =        |                |
| X \$ 100 =       |                |
| + \$ 180 =       |                |
| TOTAL ADDIT. FEE |                |

OR

OR

OR

OR

OR

OR

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 50 =        |                |
| X \$ 200 =       |                |
| + \$ 360 =       |                |
| TOTAL ADDIT. FEE |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.